



Message from our President Carol Burke, CTR

Message from ANCCR President

Once again, I would like to thank ANCCR for allowing me the privilege of attending the NCRA Educational Meeting in Minneapolis, MN in April. North Carolina was well represented at the meeting and I am sure anyone who attended will tell you that it was a wonderful meeting. Informatics, EMR, quality measures and staging seemed to be the most pressing topics. The governor of Minnesota was present on the last day of the meeting for a question and answer session and most of the questions had to do with the upcoming changes in the healthcare system. He was very complimentary of the work that we do, and realized how very important the data collection is. Next year, the meeting will be held in New Orleans, LA and Inez Evans will be installed as the President of NCRA.

I was able to attend the 2<sup>nd</sup> Annual Cancer Survivorship Summit in Winston-Salem on June 13<sup>th</sup> with Deborah Carrethers. What an inspiration to see so many cancer survivors from all over the state. I bet you guys didn't know that at the mention of seeing a spider Deborah can hurl boxes through the air and walk on air to get away. Anyone who happened to witness that incident must have gotten a laugh out of it - I was laughing so hard I had to sit down (plus I had to pick up the boxes of ink pens that spilled).

As you will see in this issue of The Sentinel we have a great slate of candidates for the elected officers. I would encourage anyone who wants to be more involved to run for office or to volunteer to serve on a committee. This is a great way to network and to meet new people, and to have fun experiences like Deborah and I did.

The planning committee has done an excellent job of planning this year's meeting, which I am sure you will find out quickly once the meeting date arrives. Next year the meeting will be held in the beautiful mountains of Asheville.

Last, but certainly not least, I would like to thank you for the opportunity to serve as the president of such a wonderful organization. The support shown to me over these past two years has been phenomenal. Anyone who knows me, knows how hard it is for me to stand up in front of a room of people and make words come out of my mouth, but I have gotten through it and it is getting easier each time. I appreciate each and every one of you, and all of your kind words and encouragement. This has been a time of opportunity and growth that will help me for many years to come.

### **ANCCR's Executive Board 2007-2008**

President: Carol Burke, CTR	Bylaws: Debra Witzler, BS, RHIT, CTR
Carol.burke@pardeehospital.org	dwitzler@unch.unc.edu
Immediate Past President:	Education: Inez Evans, BS, RHIT, CTR
Elizabeth Tucker, CTR	ievans@wfubmc.edu
estucker6@hotmail.com	Historian: Sheri Breitenbach, RN, CTR
Vice President & Program Chair:	sherilyn.Breitenbach@rexhealth.com
Deborah Carrethers, CTR	Membership: Vickie Gill, RHIA, CTR
dgcarrethers@novanthealth.org	vagill@novanthealth.org
Secretary: Susan Brossoie, RHIT, CTR	Nominating: Blanche Sellars, CTR
sbrossoi@unch.unc.edu	annie.sellars@rexhealth.com
Treasurer: Tara Lewis, BA, CTR	Publications: Inez Evans, BS, RHIT, CTR
Tara.lewis@msj.org	ievans@wfubmc.edu
Ways & Means: Patricia West, CTR	Web Site Coordinator & ACCCC Liaison:
Grants & Vendors: Paige Tedder, CTR	Cathy Rimmer, BA, MDiv, CTR
pdt564@hotmail.com	ccrimmer@novanthealth.org
New Registrar Training:	NCRA Liaison: Elizabeth Tucker, CTR
Melissa Pearson, CTR	estucker6@hotmail.com
melissa.pearson@ncmail.net	Central Cancer Registry Liaison: open

## WAYS & MEANS SILENT ACTION AND WHITE ELEPHANT SALE HAS BEEN CANCELED FOR THIS YEARS ANNUAL FALL MEETING, DUE TO LACK OF TABLE SPACE!

However, we do have a few items that will be Raffled off and we will still do the 50/50 Raffle each day!

So, if you were planning to bring donation items for this years Ways & Means, please save them to bring to next years meeting!

Thanks! Patricia West

#### NCRA ADVOCACY AND TECHNICAL PRACTICE DIRECTOR By Melanie Rogan, CTR ATPD Eastern Region

I am beginning my second year as your ATPD and am looking forward to continuing communications with all of you. This past year I have been in contact with our state presidents, the leaders of our SIGS and our committee liaisons and many of you. I have met so many exceptional Cancer Registrars. I even had the opportunity to speak at some of the state meetings this past fall on behalf of NCRA. This communication will continue this year and I would like to encourage you to consider running for ATPD from the Eastern region, as I will be completing my term next spring. Volunteering in any capacity either with the NCRA or in your own state organization is very rewarding and a lot of fun. It is a wonderful opportunity for networking with other Cancer Registrars. You are also awarded the opportunity to make and maintain lasting friendships with other members.

I would like to say how proud I am of Sarah Burton, who is the current ATPD in the Midwestern region. Sarah was selected to receive the Outstanding New Professional Award this year. This is a new award to honor new NCRA members who have made a significant contribution to the cancer registry profession. The award was established to stimulate the professional growth of new registrars by recognizing early in their career the importance of their contributions. NCRA will be looking for a candidate for this award next year. You may nominate an active NCRA member who is a CTR within four years of initial certification. The criteria for selection include outstanding leadership, innovation, creativity, motivation and significant contribution to the profession of NCRA. A lot of states already have a Distinguished Member Award already in place as does NCRA. Consider honoring a new professional as well!

Professionalism in the Cancer Registry was a hot topic at the NCRA Educational Conference this year. All of us can help promote our profession in our own facilities within the Cancer Program and in other areas in the facility as well as in the community. One way to promote professionalism in your registry is to use the data you collect. Make the physicians as well as your hospital administrators aware of the data we collect and how powerful and useful it can be to them. Create reports and graphs to share at Tumor Boards and Cancer Committee meetings. Empower your facility and share with them what an important part of the Cancer Program the registry is!

At NCRA, I was able to network with many of you and I look forward to hearing from you this year. The conference was extremely informative with a wide range of topics. If you were unable to attend, please visit the website at <u>www.ncra-usa.org</u> and click on the link for the NCRA Store. Scroll down to the NCRA Encore Sessions and click on the 2008 Annual Conference. Members and Non Members can purchase a CD with most of the sessions included. You can also earn CE's toward your CTR maintenance. We hope to see you next year in New Orleans May 31-June 3 at the 2009 annual conference.

Congratulations to all the new CTR's who recently passed the CTR exam this spring! You deserve a big round of applause!

I would like to remind you to update your association's contact and event information at <u>http://www.ncra-usa.org/resources/index.htm</u>. From this link, you may choose your state and which information you would like to update. As state president's change and new meetings are planned, it is important that your information is posted accurately on NCRA's web site for other registrars to access. If you need assistance changing or updating this information, please feel free to contact me.

Please remember I am here to address your advocacy issues. They should be submitted on the NCRA website through" Raise Your Voice". But if you ever have a question or just want to say hello, you can email me at <u>mroganctr@yahoo.com</u>.

### Commission on Cancer Inquiry and Response System

Inquiry and Response System				
SEER Multiple Primary & Histology		If a patient had a papillary transitional cell ca of the bladder (8130) and less than 3 years later an adenocarcinoma of the bladder (8140), is it one or two primaries?	We follow Urinary Rule M9 (histology different at third number) and report two primaries. Curator	
27165 6/30/2008	SEER Multiple Primary & Histology		Is endometrial adenocarcinoma with focal squamoid differentiation, endometroid type coded to 8323, mixed cell adenocarinoma Table 2?	Per the Definitions in the General Instructions, Focal means limited to one specific area, so we do not include that information in choosing our code. We would follow Other Sites Rule H4 (NOS plus specific type) and code adenocarcinoma, endometrioid type (8380/3). Curator
27170 6/30/2008	SEER Multiple Primary & Histology		If the endoscopy shows portions of adenomatous polyp containing adenocarcinoma, but the final resection pathology shows adenocarcinoma nos, does not mention polyp, do we still code the adeno in a polyp?	Use MPH rule H4 when there is a diagnosis of adenocarcinoma AND reference to a residual or pre-existing polyp within the medical record. That includes references within the operative note, endoscopy note, or even other physician documentation that a polyp was found in the same colon segment within a short time prior to the surgery. Code 8210/3. Curator
27188 6/30/2008	SEER Multiple Primary & Histology		A patient had a left dorsal forearm lesion and the path said malignant melanoma, mixed type, superficial spreading melanoma and lentigo maligna melanoma, Clark level II, Breslow depth 0.45mm. There was also melanoma in situ, NOS in the lesion. We stop at H4 and coded the invasive histology, but there is not a mixed code for this	H4 tells us to code the invasive histologic type. Go through the rules again to determine which histology to code. There is no mixed or combination code for melanoma. We continue to Rule H7 and code the mix of lentigo maligna

		melanoma. Do we stop at H7 and code the superficial spreading melanoma as the histology?	melanoma plus superficial spreading as the superficial spreading (8743). Curator
27222 6/30/2008	SEER Multiple Primary & Histology	Patient with a Stage 4 base of tongue primary in 2003 was treated with radiation, surgery and chemo. A CT scan 8/28/07 identified multiple pulmonary nodules which on biopsy were the same histology as the base of tongue. Scans and oncology notes were indecisive as to whether this was metastatic disease from the base of tongue or a new right upper lobe lung primary. Is this mets or a new primary?	Unless more evidence becomes apparent or the patient is treated for a lung primary, code this as metastases because the patient had Stage IV disease at diagnosis and there are multiple pulmonary lesions. Curator
27114 6/27/2008	SEER Multiple Primary & Histology	#24596: A pt had a ADK in the lower rectum which passed through an abdominoperineal resection in 2004. In 2008 he had swelling at the anal closure which was punctured and revealed ADK. Is it a recurrence? Will the topography code be rectum, anus or colon NOS?	When a patient has colon cancer, the cancer is usually in the "center" of the colon that was removed. When you look at the definition of a hemicolectomy you see that the entire segment of colon was removed along with partial removal of the sections on either side of the tumor. That means that the so called "recurrence" at the anastomotic site is not in the same segment of colon. That segment is gone - permanently. This tumor is in a different subsite of the colon and is a new primary unless the pathologist calls it metastatic. Curator
27134 6/27/2008	SEER Multiple Primary & Histology	Path report final dx was soft palate bx, invasive well differentiated squamous cell carcinoma with verrucous growth pattern. Is this coded as squamous cell carcinoma or verrucous carcinoma?	Growth pattern is not a term documented in the MP/H Rules to use as a guideline for pathology coding. We would follow Rule H3 and code one type, squamous cell, 8070/3. The term "verrucous"

				refers to the pattern of growth seen on the surface of the tumor. The "invasive" portion of these tumors is often hard to identify because they are "pushing" rather than invading in the typical manner. 8051/3 ought to be reserved for those tumors diagnosed specifically "verrucous carcinoma." Curator
27166 6/27/2008	SEER Multiple Primary & Histology		#22857: Since the percentage of signet ring cell carcinoma is unknown, I could code 8140, as described in rule H6. I could also apply rule H13 since the diagnosis does contain a more specific term. Is the difference in the use of the words "with" or "and?" Why wouldn't code 8255 apply?	Adenocarcinoma is an NOS or umbrella term. Follow the Other Rules histology Rule H13 when you have adenocarcinoma plus one subtype and code the signet ring carcinoma. You cannot use Rule H13 because the rules are hierarchical and you must stop when you reach the appropriate rule (H13). Also note that Rule H16 refers you to Table 2, where the first column is adenocarcinoma and TWO other subtypes. You cannot use this rule for adenocarcinoma and ONE subtype. Curator
27157 6/26/2008	FORDS		A patient diagnosed at another hospital came to our facility for a staging workup. Chemo thx was started at staff physician's office. Is this a reportable case?	Because your facility was involved in the staging workup/treatment planning, and treatment was given in a staff physicians office, this would be a class of case 2 for your facility.
27161 6/26/2008	AJCC COLLABORATIVE STAGING	Corpus Uteri C54	If a patient with endometrial carcinoma had metastases to the abdominal serosa, is the M stage M1 or M0(T3a)? Under the M1 specifications, pelvic serosa is excluded, so does this imply that abdominal serosa indicates a distant met, M1?	According to CS pII- 396, abdominal serosa is listed, code 80 which is a T4.

### **CANDIDATE PROFILES**

### FOR PRESIDENT

NAME:	Deborah Grady Carrethers, CTR	
INSTITUTION:	Forsyth Medical Center and High Point Regional Hospital	
ADDRESS:	3333 Silas Creek Parkway, Winston-Salem, NC	
PHONE/OFFICE:	336-718-8463	
CURRENT OCCUPATION/TITLE: Lead Registrar		

**JOB EXPERIENCE (include years of experience in Cancer Registry/other related work):** 1989-present Cancer Registry Data Base

#### ANCCR/NCRA HISTORY (include years, membership/offices held, etc):

#### Association of North Carolina Cancer Registrars

Member since 19891998-1999Secretary2000-2001Vice President2002-2007Membership Chair2004-2008Education Committee2007-2008Vice President

### National Cancer Registrars Association

1992-1993 Public Relations Committee

# **OTHER PROFESSIONAL HISTORY/EDUCATION (include special training, publications, activity in other organizations):**

Insurance Department Task Team Leader-implemented new policy for faster production of work Employee Activity Committee for Forsyth Hospital Cancer Prevention Screening 1995-present

Caller Flevenuoli Screening 1995-pres

Cancer Survivors Day 1995-present

Relay for Life 1997-present

Volunteer for Human Service Alliance

Work AQC (Aids Patients) 2004-present

President of F.R.E.S.H. (Health Ministry for Holy Trinity Full Gospel Church)

# **CANDIDATE PROFILES**

### FOR PRESIDENT

NAME: Leta A. Vess, BA, CTR

**INSTITUTION:** FirstHealth Moore Regional Hospital

ADDRESS: P O BOX 3000, Pinehurst, NC 28374

**PHONE/OFFICE:** 910-715-5292

**CURRENT OCCUPATION/TITLE:** Supervisor, Cancer Registry

### JOB EXPERIENCE (include years of experience in Cancer Registry/other related work):

1995-1997Processing clerk, Medical Records1998-1999Abstractor, Cancer Registry1999-presentSupervisor, Cancer RegistryAll above experience at MRH

### ANCCR/NCRA HISTORY (include years, membership/offices held, etc):

#### Association of North Carolina Cancer Registrars

2002-2005 - By-laws Committee Chair 2005-2007 - Secretary 2006-Host Registry, ANCCR annual meeting

#### National Cancer Registrars Association

- 2002 Jr. Co-leader, Cancer Program Managers Special Interest Group
- 2003 Sr. Leader, Cancer Program Managers Special Interest Group
- 2004 Member, Legislative/Advocacy Task Force
- 2006 Member, Marketing Committee

# OTHER PROFESSIONAL HISTORY/EDUCATION (include special training, publications, activity in other organizations):

BA, Emory University, Atlanta, GA

# **CANDIDATE PROFILES**

### FOR VICE PRESIDENT

NAME:	Tara Moore Lewis, BA, CTR
INSTITUTION:	Mission Hospitals
ADDRESS:	428 Biltmore Ave, Asheville, NC 28801
PHONE/OFFICE:	828-242-0931
CURRENT OCCUP	<b>TION/TITLE:</b> Cancer Data Analyst
JOB EXPERIENCE	(include years of experience in Cancer Regis

DB EXPERIENCE (include years of experience in Cancer Registry/other related work):1999-2008Cancer Registry, previous supervisor, currently part-time registrar2006-2008Instructor, Cancer Information Management Program at Davidson County<br/>Community College

### ANCCR/NCRA HISTORY (include years, membership/offices held, etc):

### Association of North Carolina Cancer Registrars

Member for 8 years 2006-2008 Treasurer

### National Cancer Registrars Association

Member for 8 years

# **OTHER PROFESSIONAL HISTORY/EDUCATION (include special training, publications, activity in other organizations):**

Accounting Chair for Asheville's Relay For Life

## **CANDIDATE PROFILES**

### FOR VICE PRESIDENT

NAME: Debra Witzler, RHIT, CTR

**INSTITUTION:** UNC Healthcare

ADDRESS: 101 Manning Dr, Chapel Hill, NC 27514

**PHONE/OFFICE:** 919-843-6393

CURRENT OCCUPATION/TITLE: Cancer Registrar

**JOB EXPERIENCE (include years of experience in Cancer Registry/other related work):** 8 years - Registrar 4 years - Registry Coordinator

### ANCCR/NCRA HISTORY (include years, membership/offices held, etc):

### Association of North Carolina Cancer Registrars

Member since 1996 By-laws Chair Treasurer

### National Cancer Registrars Association

Member since 1996 By-laws Committee Chair Education Committee Ethics Committee Chair Ethics Committee

# OTHER PROFESSIONAL HISTORY/EDUCATION (include special training, publications, activity in other organizations):

## **CANDIDATE PROFILES**

### FOR SECRETARY

NAME: Susan Marie Brossoie, RHIT, CTR

**INSTITUTION:** UNC Healthcare

ADDRESS: 101 Manning Dr., Chapel Hill, NC 27514

**PHONE/OFFICE:** 919-966-4515

**CURRENT OCCUPATION/TITLE:** Cancer Registry Coordinator

**JOB EXPERIENCE (include years of experience in Cancer Registry/other related work):** 1 year at SUNY Health Science in Syracuse, NY 10 years at UNC Chapel Hill - 2 years as registrar, 7 years as supervisor, 1 year as coordinator

### ANCCR/NCRA HISTORY (include years, membership/offices held, etc):

Association of North Carolina Cancer Registrars

Member since 1998 2007-2008 Secretary

### National Cancer Registrars Association

Member since 1998 2005-2006 Hospital SIG Jr. Leader

OTHER PROFESSIONAL HISTORY/EDUCATION (include special training, publications, activity in other organizations):

Consultant for CDC/Battelle Research 2007 for HPV Pilot Study

## **CANDIDATE PROFILES**

## FOR SECRETARY

NAME: Sharon I. Gilkerson, CTR

**INSTITUTION:** Carolinas Healthcare System

ADDRESS: 1000 Blythe Blvd

**PHONE/OFFICE:** 704-355-3486

**CURRENT OCCUPATION/TITLE:** Supervisor Cancer Data Services

### JOB EXPERIENCE (include years of experience in Cancer Registry/other related work):

3 years at Holzer Medical Center, Gallipolis, Ohio

2 years-developed a 5 hospital registry system at Ohio University in Athens, Ohio

21 years at Carolinas Medical Center as supervisor, achieved Teaching Hospital Approval then achieved Network Program Approval 2007 for 4 hospital network

### ANCCR/NCRA HISTORY (include years, membership/offices held, etc):

Association of North Carolina Cancer Registrars

Member since 1986

### National Cancer Registrars Association

Member since 1986 NCRA Week Chair NCRA Week Committee

OTHER PROFESSIONAL HISTORY/EDUCATION (include special training, publications, activity in other organizations):

## CANDIDATE PROFILES

### FOR TREASURER

NAME:	Eileen J. Morgan, MPA, CTR
INSTITUTION:	Duke University Hospital (Duke Comprehensive Cancer Center)
ADDRESS:	Box 2735 DUMC, Durham, NC 27710
PHONE/OFFICE:	919-684-0330

**CURRENT OCCUPATION/TITLE:** Manager, Duke and Durham Regional Tumor Registry

JOB EXPERI	ENCE (include years of experience in Cancer Registry/other related work):
8/01 to present	Manager, Duke/DRH Tumor Registry, Durham, NC
11/00 to 7/01:	Tumor Registry Consultant, K-Force, Tampa, Florida
2/99 to 8/00:	Quality Management Specialist, Lifespire, Inc, Chicago, IL (Oncology Disease
	Management Co.)
9/78 to 1/99:	Cancer Program/Registry Manager, Lutheran General Hospital, Park Ridge, IL
11/75 to 9/78:	Coordinator, Cancer Registry, Lutheran General Hospital, Park Ridge, IL
1/75 to 5/75:	Research Assistant, Radiation Oncology, Lutheran General Hospital, Park Ridge, IL

### ANCCR/NCRA HISTORY (include years, membership/offices held, etc):

### Association of North Carolina Cancer Registrars

Member since 2001

Planning Committee for 2005 Annual Meeting

### National Cancer Registrars Association

Member since 1992 2001-2002 Task Force for Registry Staffing Manual (published 2002)

# OTHER PROFESSIONAL HISTORY/EDUCATION (include special training, publications, activity in other organizations):

SEER 2002-2003: Served on Non-Malignant CNS Tumor Task Force to develop Reportability Guidelines

AJCC 2007-2008: Served on Task Force for development of AJCC 7<sup>th</sup> Edition (CNS tumors) Member of the Washington State Tumor Registrar's Association 2000-2001 Member of the Chicago Area Cancer Registrar's Association 1976-2000 Church Treasurer 1986-1989: Resurrection Lutheran Church, Niles, IL

Master of Public Administration, Roosevelt University, Chicago, IL (1988) Bachelor of Arts, Valparaiso University, Valparaiso, IN (1969)

## CANDIDATE PROFILES

### FOR TREASURER

NAME: Ann B. Murphy, CMA, CTR

**INSTITUTION:** Craven Regional Medical Center

ADDRESS: P.O. Box 12157, New Bern, NC 28561

**PHONE/OFFICE:** 252-633-8790

CURRENT OCCUPATION/TITLE: Cancer Registrar

**JOB EXPERIENCE (include years of experience in Cancer Registry/other related work):** 10 years experience in the Cancer Registry with 8 years as supervisor 4 years experience in Health Information Services

### ANCCR/NCRA HISTORY (include years, membership/offices held, etc):

#### Association of North Carolina Cancer Registrars

Member since 2000 Planning Committee for 2007 Annual Meeting

National Cancer Registrars Association

Member since 2000

# OTHER PROFESSIONAL HISTORY/EDUCATION (include special training, publications, activity in other organizations):

2000 - Certified Medical Assistant (CMA), AAS Degree, inducted into the Phi Theta Kappa Honor Society.

2001 - CTR, undergone three surveys with the ACoS with the fourth one being in 2009.

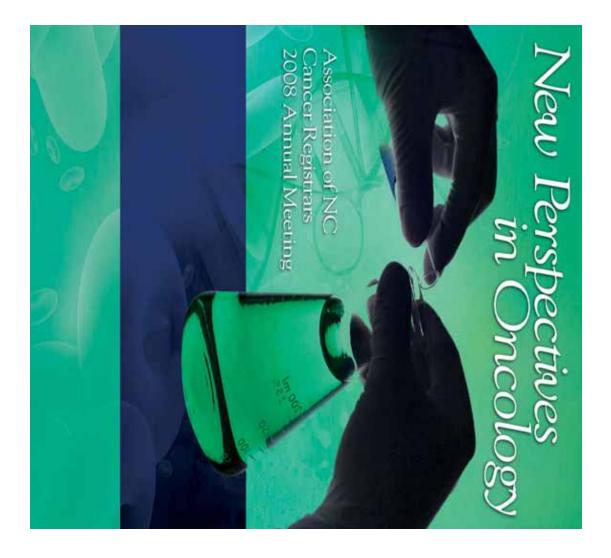
General Accounting procedures, cancer programs annual budget, computer skills - Microsoft Word/Office, ERS, Excel, and the AS/400.

## **OFFICIAL <u>ABSENTEE</u>** BALLOT – 2008 Please mark your choice with an x or checkmark

PRESIDENT	(VOTE FOR ONE ONLY)
Deborah Carrethers, CTR	
Leta Vess, CTR	
VICE-PRESIDENT	
Tara Lewis, CTR	
Debra Witzler, CTR	
SECRETARY	
Susan Brossoie, CTR	
Sharon Gilkerson, CTR	
TREASURER	
Eileen Morgan, CTR	
Ann Murphy, CTR	

Absentee ballots must be received by September 10, 2008. Please include name and address on your return envelope. Send to Blanche Sellars, CTR, Chairman, ANCCR Nominating Committee, 3900 Holder Road, Durham, N.C 27703

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## NEW PERSPECTIVES IN ONCOLOGY

## ANCCR 2008 ANNUAL MEETING

SEPTEMBER 24-26, 2008

BROOKSTOWN INN, WINSTON-SALEM, NC

Hosted By Forsyth Medical Center Wake Forest University Baptist Medical Center